# **Application Data Sheet**

Secrecy Order in Parent Appl.?::

# **Application Information**

Application number::	
Filing Date::	12/08/03
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	RETRACTABLE BADGE REEL WITH
	BILLBOARD DISPLAY
	DIEEDOMAD DIOI EMI
Attorney Docket Number::	004844-00023
Attorney Docket Number:: Request for Early Publication?::	•
•	004844-00023
Request for Early Publication?::	004844-00023 NO
Request for Early Publication?:: Request for Non-Publication?::	004844-00023 NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure::	004844-00023 NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets::	004844-00023 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?::	004844-00023 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name::	004844-00023 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name:: Variety denomination name::	004844-00023 NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name:: Variety denomination name:: Petition included?::	004844-00023 NO NO

NO

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Richard

Middle Name:: M

Family Name:: Raia

Name Suffix::

City of Residence:: Lexington

State or Province of Residence:: MA

Country of Residence:: USA

Street of mailing address:: 14 Robbins Road

City of mailing address:: Lexington

State or Province of mailing address:: MA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 02421

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Robert

Middle Name:: N

Family Name:: Brosofsky

Name Suffix::

City of Residence:: Nashua

State or Province of Residence:: NH

Country of Residence:: USA

Street of mailing address:: 1 Clocktower Place

City of mailing address:: Nashua

State or Province of mailing address:: NH

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 03060

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Matthew

Middle Name::

Family Name:: Lynch

Name Suffix::

City of Residence:: Burlington

State or Province of Residence:: MA

Country of Residence:: USA

Street of mailing address::

City of mailing address:: Burlington

State or Province of mailing address:: MA

Country of mailing address:: USA

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship Country::** 

Status:: Full Capacity

Given Name:: Lee

Middle Name::

Family Name:: Porter

Name Suffix::

City of Residence:: Burlington

State or Province of Residence:: MA

Country of Residence:: USA

Street of mailing address::

3

City of mailing address:: Burlington

State or Province of mailing address:: MA

Country of mailing address:: USA

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Angela

Middle Name::

Family Name:: Tsui

Name Suffix::

City of Residence:: Lexington

State or Province of Residence:: MA

Country of Residence:: USA

Street of mailing address:: 22 Webster Street

City of mailing address:: Lexington

State or Province of mailing address:: MA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 02173

**Correspondence Information** 

Correspondence Customer Number:: 22910

**Representative Information** 

Representative Customer Number:: 22910

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/433,075	12/13/02

## **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
		-	

## **Assignee Information**

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::